Amendments to the Claims

1.   (Previously presented) A method of treating a patient having a tissue that is subject to an ischemic event, comprising:

parenterally administering a sub-anesthetic amount of a formulation comprising a halogenated volatile anesthetic to a patient having a tissue that is subject to an ischemic event, wherein the sub-anesthetic amount is effective to improve the tissue's resistance to or tolerance of the ischemic event.

2.   (Original) The method of claim 1, wherein the formulation administered further comprises an emulsification adjuvant and an emulsifier.

3.   (Canceled)

4.   (Original) The method of claim 1, wherein the tissue is selected from heart, brain, vasculature, gut, liver, kidney and eye.

5.   (Original) The method of claim 1, wherein the ischemic event is selected from aortic aneurysm repair, multiple trauma, peripheral vascular disease, renal vascular disease, myocardial infarction, stroke, sepsis and multi-organ failure.

6.   (Canceled)

7.   (Original) The method of claim 1, wherein the administration is conducted prior to the ischemic event.

8.   (Original) The method of claim 1, wherein the administration is conducted concomitantly with the ischemic event.

9.   (Original) The method of claim 1, wherein the administration is conducted after the ischemic event.

10.   (Original) The method of claim 1, wherein the administration comprises bolus administration of the formulation.

11.   (Original) The method of claim 1, wherein the administration comprises continuous infusion of the formulation.

12.   (Original) The method of claim 1, wherein the halogenated volatile anesthetic is selected from the group consisting of desflurane, isoflurane, enflurane, halothane and sevoflurane.

13.   (Previously presented) The method of claim 1, wherein the tissue is heart tissue.

14.   (Currently amended) The method of claim 1, wherein the patient is in need of cardioprotection [[cardiprotection]].

15.   (Previously presented) The method of claim 1, wherein the patient is in need of neuroprotection.